

-165-

An even more preferred therapy for the treatment of fallopian tube cancer is a combination of therapeutically effective amounts of one or more COX-2 inhibitors in combination with the following

- 5 combinations of antineoplastic agents: 1) cisplatin, doxorubicin, cyclophosphamide; 2) hexamethylmelamine, cyclophosphamide, doxorubicin, cisplatin; 3) cyclophosphamide, hexamethylmelamine, 5-fluorouracil, cisplatin; 4) melphalan, hexamethylmelamine, cyclophosphamide; 5) melphalan, doxorubicin, cyclophosphamide; 6) cyclophosphamide, cisplatin, carboplatin; 7) cyclophosphamide, doxorubicin, hexamethylmelamine, cisplatin; 8) cyclophosphamide, doxorubicin, hexamethylmelamine, carboplatin; 10 9) cyclophosphamide, cisplatin; 10) hexamethylmelamine, doxorubicin, carboplatin; 11) cyclophosphamide, hexamethylmelamine, doxorubicin, cisplatin; 12) carboplatin, cyclophosphamide; 13) cisplatin, cyclophosphamide.

20

Example 8

Central Nervous System Cancers

Central nervous system cancer accounts for approximately 2% of new cancer cases in the United States. Common intracranial neoplasms include glioma, meningioma, neurinoma, and adenoma.

A preferred therapy for the treatment of central nervous system cancers is a combination of therapeutically effective amounts of one or more COX-2 inhibitors.

-166-

A preferred therapy for the treatment of malignant glioma is a combination of therapeutically effective amounts of one or more COX-2 inhibitors in combination with the following combinations of therapies and antineoplastic agents:: 1) radiation therapy, BCNU (carmustine); 2) radiation therapy, methyl CCNU (lomustine); 3) radiation therapy, medol; 4) radiation therapy, procarbazine; 5) radiation therapy, BCNU, medrol; 6) hyperfraction radiation therapy, BCNU; 7) radiation therapy, misonidazole, BCNU; 8) radiation therapy, streptozotocin; 9) radiation therapy, BCNU, procarbazine; 10) radiation therapy, BCNU, hydroxyurea, procarbazine, VM-26; 11) radiation therapy, BNCU, 5-flourouacil; 12) radiation therapy, Methyl CCNU, dacarbazine; 13) radiation therapy, misonidazole, BCNU; 14) diaziquone; 15) radiation therapy, PCNU; 16) procarbazine (matulane), CCNU, vincristine. A preferred dose of radiation therapy is about 5,500 to about 6,000 cGY. Preferred radiosensitizers include misonidazole, intra-arterial Budr and intravenous iododeoxyuridine (IUdR). It is also contemplated that radiosurgery may be used in combinations with antiangiogenesis agents.

Example 9

Additional examples of combinations are listed in Table No 19.

Table No. 19. Combination therapy examples

COX-2 Inhibitor	Antineoplastic Agents	Indication
Celecoxib	Anastrozole	Breast
Celecoxib	Capecitabine	Breast
Celecoxib	Docetaxel	Breast
Celecoxib	Gemcitabine	Breast,

-167-

		Pancreas
Celecoxib	Letrozole	Breast
Celecoxib	Megestrol	Breast
Celecoxib	Paclitaxel	Breast
Celecoxib	Tamoxifen	Breast
Celecoxib	Toremifene	Breast
Celecoxib	Vinorelbine	Breast, Lung
Celecoxib	Topotecan	Lung
Celecoxib	Etoposide	Lung
Celecoxib	Fluorouracil	Colon
Celecoxib	Irinotecan (CPT-11)	Colon, Bladder
Celecoxib	Retinoids	Colon
Celecoxib	DFMO	Colon
Celecoxib	Ursodeoxycholic acid	Colon
Celecoxib	Calcium carbonate	Colon
Celecoxib	Selenium	Colon
Celecoxib	Sulindac sulfone	Colon
Celecoxib	Carboplatin	Brain
Celecoxib	Goserelin Acetate	Prostate
Celecoxib	Cisplatin	
Celecoxib	Ketoconazole	Prostate
Rofecoxib	Anastrozole	Breast
Rofecoxib	Capecitabine	Breast
Rofecoxib	Docetaxel	Breast
Rofecoxib	Gemcitabine	Breast, Pancreas
Rofecoxib	Letrozole	Breast
Rofecoxib	Megestrol	Breast
Rofecoxib	Paclitaxel	Breast
Rofecoxib	Tamoxifen	Breast
Rofecoxib	Toremifene	Breast
Rofecoxib	Vinorelbine	Breast, Lung
Rofecoxib	Topotecan	Lung
Rofecoxib	Etoposide	Lung
Rofecoxib	Fluorouracil	Colon
Rofecoxib	Irinotecan (CPT-11)	Colon, Bladder
Celecoxib	Retinoids	Colon
Celecoxib	DFMO	Colon
Celecoxib	Ursodeoxycholic acid	Colon
Celecoxib	Calcium carbonate	Colon
Celecoxib	Selenium	Colon